

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number <u>66329/97406B</u>									
CLAIMS AS FILED - PART I					SMALL ENTITY OR OTHER THAN SMALL ENTITY									
(Column 1) (Column 2)					(Column 3)									
FOR		NUMBER FILED		NUMBER EXTRA		RATE		FEE		RATE		FEE		
BASIC FEE (37 CFR 1.16(a))						\$ 345				\$ 690				
TOTAL CLAIMS (37 CFR 1.16(c))		21 minus 20 = * 1				x \$ 9 =				x \$ 18 = 18				
INDEPENDENT CLAIMS (37 CFR 1.16(b))		5 minus 3 = * 2				x 39 =				x 78 = 156				
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ 130 =				+ 260 = 0				
*		If the difference in column 1 is less than zero, enter "0" in column 2				TOTAL				TOTAL		864.00		
7-24-04					CLAIMS AS AMENDED - PART II		SMALL ENTITY OR OTHER THAN SMALL ENTITY							
(Column 1) (Column 2) (Column 3)					(Column 4) (Column 5) (Column 6)		RATE		ADDITIONAL FEE		RATE		ADDITIONAL FEE	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		x \$ ___ =		x \$ ___ =				
		Total (37 CFR 1.16(c))		* 18 Minus		** 21 = /		x ___ =		x ___ =				
Independent (37 CFR 1.16(b))		* 4 Minus		*** 5 = /		+ ___ =		+ ___ =						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					TOTAL ADDIT. FEE		TOTAL ADDIT. FEE		TOTAL ADDIT. FEE		TOTAL ADDIT. FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		x \$ ___ =		x \$ ___ =				
		Total (37 CFR 1.16(c))		* Minus		** =		x ___ =		x ___ =				
Independent (37 CFR 1.16(b))		* Minus		*** =		+ ___ =		+ ___ =						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					TOTAL ADDIT. FEE		TOTAL ADDIT. FEE		TOTAL ADDIT. FEE		TOTAL ADDIT. FEE			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		x \$ ___ =		x \$ ___ =				
		Total (37 CFR 1.16(c))		* Minus		** =		x ___ =		x ___ =				
Independent (37 CFR 1.16(b))		* Minus		*** =		+ ___ =		+ ___ =						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					TOTAL ADDIT. FEE		TOTAL ADDIT. FEE		TOTAL ADDIT. FEE		TOTAL ADDIT. FEE			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.